

BOILER / PRESSURE VESSEL INSPECTION

Safety Inspection Unit Boiler Inspection Section 1100 N Eutaw St. Room 605 Baltimore MD 21201

1	DATE INSPE	PECTED* CUR CERT EXP DATI		E* JURISDICT		DICTION #*	NB #*			OWNER#		SE	SERIAL#			
	PHYSICAL LOCATION NAME*			PHYSICAL ADDRESS*						CITY*			STATE*		ZIP *	
2	OWNER		OWNER ADDRESS					CITY			STATE		ZIP			
	MAIL INVOIC		INVOICE ADDRESS					CITY			STATE		ZIP			
	MAIL CERT T		CERTIFICATE ADDRESS					CITY			STATE		ZIP			
3	SPECIFIC LO	N PLANT*	USE*													
4	MANUFACTURER* MODEL #*			YEAR BU	JILT*	YEAR INSTALI	YEAR INSTALLED* INSTALLED N ☐ Yes ☐						*	ASM STAN	E CODE //P *	
5	FUEL (if Boiler)* / FLUID (if PV)*				FUEL TRAIN (if Boiler)* If OTHER, explain fully CSD-1 Other					FIRING METHOD (if Boiler)* If OTHER, explain fu						
6	MAWP STAMPED MAWP CALCULATED (PSIG)*			PRD CAP REQD* (include units)						ATUS* quick Referer		NSPECTION TYPE*				
	CERT POSTED* M		AWP ALLOWED	PRD(S)	SFT AT	(PSIG)*	SIG)* TOTAL PRD				include units)		INT EXT PRESSURE GA		COS IGE TESTED)*
7	Yes	(F	PSIG)*	(3.3)			(<i>-</i> ,	☐ Yes ☐ No					
8	IS CONDITION OF OBJECT SUCH THAT A CERTIFICATE MAY BE					E ISSUED?*						MED				
	☐ Yes ☐		Yes No					OPSIG DATE								
9	COMMENTS, EXPLANATIONS AND COMPLETE NAMEPLATE INFORMATION:															
10	CONDITIONS Include Violations: Describe new installation documentation; repairs and alterations quality and documentation "R" Form since last inspection; each non-conformity (violation to Law, Regulations or Codes; deposits such as oil, scale, etc.; defects such as corrosion, erosion, grooving, bulging, cracking, etc.; condition of setting, lining baffles, supports, tubes, tube ends, coils, nipples, rivets, stays (bowed, loose, broken) etc.; condition of water level, pressure, and temperature indicators a controllers, pressure relief devices, fuel train, blowdown, piping, etc.; Attach a map of the object if helpful.													ings,		
		1 controllers, pressure relief devices, ruer train, blowdown, piping, etc., Attach a map of the object if helpful.														
11	REQUIREMENTS TO RESOLVE EACH VIOLATION:															
12	STATIONARY	' ENG NA	ME	STATIONARY ENG GRADE OF LICE				F LICE	ENSE LI			ICENSE #				
THE INSPECTOR EXPLAINED HIS FINDINGS TO ME*		SIGNATURE					PF			PRINTED NAME						
		EMPLO	YED BY			TITLE			LO	LOCATION PHONE			OTHER CONT.			
		INSDEC	TOR SIGNATURE		·				INSPECTOR NAME PRINTED							
I HEREBY CERTIFY THIS IS A TRUE REPORT OF MY INSPECTION*		INSPEC	TON SIGNATURE					IINS	I LCTOR N	INTED	EU					
		INSPEC	TOR EMPLOYED BY					MD COM			SION #	NB COM	NB COMMISSION #			
	COPY	FOR INS		COPY FOR OWNER (SER COPY			OPY FOR	FOR CONTRACTOR OR INSTALLER					